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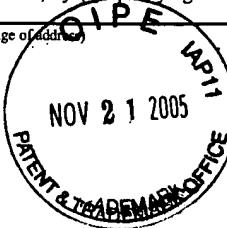
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23363 7590 11/04/2005
CHRISTIE, PARKER & HALE, LLP
PO BOX 7068
PASADENA, CA 91109-7068
11/22/2005 GWORDOF2 00000023 10624978

01 FC:2501 700.00 UP
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<i>Christina L. Vann</i>	(Depositor's name)
<i>Christina L. Vann</i>	
Nov. 17, 2005	
(Date)	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/624,978	07/22/2003	Adam K. Kolawa	49606/RRT/P396	6615

TITLE OF INVENTION: METHOD AND SYSTEM FOR TESTING DATA SOURCES AND DATABASE ORIENTED SOFTWARE APPLICATIONS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$700	02/06/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
MIZRAHI, DIANE D	2165	707-003000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Christie, Parker & Hale, LLP
 2 _____
 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Parasoft Corporation

Monrovia, California

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

Issue Fee
 Publication Fee (No small entity discount permitted)
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A check in the amount of the fee(s) is enclosed.
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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 03-1728 (enclose an extra copy of this form).

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Authorized Signature Raymond R. Tabanah

Date November 17, 2005

Typed or printed name Raymond R. Tabanah

Registration No. 43,945

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